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AO 239 (01/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)		FILED RECEIVED	LODGED	
UNITED STATES DISTRICT COUR	Т	APR 2		
District of AIRIZONA JAMES ARNETT)	8 Y	CLEPK US DIST DISTRICT OF	RICT COURT APIZONA DEPUTY	
Plaintiff/Petitioner v. BENTAMIN SNOW HOWARD, ETAL Defendant/Respondent CIV12-3	1:	1 1	TUCDTI	-00

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Signed: Sampanell

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 24 APRIL 2012

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source NEVER MAIRRIED, NO CHILDREN NO FETS.	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	s N/A	\$ N/A	\$N/A	s H/A
Self-employment	\$ 800	\$ N/A	\$500	s N/A
Income from real property (such as rental income)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Interest and dividends	s N/A	s N/A	s N/A	s N/A
Gifts	\$ H/A	\$ N/A	\$ H/A	s N/A
Alimony	s N/A	s N/A	\$ N/A	s N/A
Child support	s N/A	s N/A	s N/A	s W/A.

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Retirement (such as social security, pensions, annuities, insurance)	SNA	s HA	s N/A	\$HA
Disability (such as social security, insurance payments)	S N/A	s H/A	SNA	s N/A
Unemployment payments	\$ N/A	s N/A	s N/A	sN/A
Public-assistance (such as welfare)	s H/A	s N/A	s N/A	s N/A
Other (specify):	\$ 1\/A	s N/A	s N/A	s N/A
Total monthly income:	\$ 800	sN/A	\$ 500	s N/A

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross
			monthly pay
SELF PROJUTION	7425 N. NOHA LISARD, 4236 TUCSOH, AZ BETGI WK, STUDIO	4JAN 2001 > PRESENT	s 800 AFFROX.
H/A	N/A	NA	s H/A

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employmen	t Gross monthly pay
NA	NA	NA	· \$1/A
NA	N/A	N/A	\$ N/A
NA	NA	N/A	s N/A

4. How much cash do you and your spouse have? \$ 38 AT THE MOMENT, IN TOTAL

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
NA	NA	s N/A	s N/A
NA	NA	s MA	s N/A
NA	NA	s N/A	s N/A

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or your spouse	
Home (Value)	\$ 1/4
Other real estate (Value)	s N/A
Motor vehicle #1 (Value)	\$ 500 ESTIMATED
Make and year: 1994 SUZUKI MOTORCYCLE	
Model: VS1400 INTRUDER	
227HT Registration #: AZ-MVD RECORD 03258954	IKSBKEGCORRENT
Motor vehicle #2 (Value)	s N/A
Make and year:	
Model:	
Registration #:	
Other assets (Value) WORK EQUIPMENT, DIGITAL	\$ 8000
Other assets (Value) SAFETY EQUIPMENT, PERSONAL CARR	N : 1800

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
BI HOWARD (THIS CASE)	\$ 289,000	s N/A
NA	s N/A	s N/A
NA	s N/A	s N/A

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
NA	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included?	\$ 618 REST	s N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	s 70	s VA
Home maintenance (repairs and upkeep)	s 🔘	s NA
Food	s 65	s HA
Clothing	s O	s N/A
Laundry and dry-cleaning	SO REMO	s NA
Medical and dental expenses	s	s N/A
Transportation (not including motor vehicle payments)	s 35	s N/A
Recreation, entertainment, newspapers, magazines, etc.	s 🔾	s N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	s ()	s N/A
Life:	s 🔿	s N/A
Health:	s 🔿	s NA
Motor vehicle:	s 12	s H/A
Other:	s 🔾	s W/A
Taxes (not deducted from wages or included in mortgage payments) (specify):	s 🔿	s H/A
Installment payments		
Motor vehicle:	s WA	s NA
Credit card (name):	s N/A	s NA
Department store (name):	s NA	s H/A
Other:	s N/A	s N/A
Alimony, maintenance, and support paid to others	s N/A	s H/A

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Regul stateme	ar expenses for operation of business, profession, or farm (attach detailed ent)	\$O	s UA			
Other	(specify): UNFORSEEN COMPUTER FAILURES, FIXES	SMOT PREDICABLE	s U/A			
	Total monthly expenses:	s 800	s H/A			
9.	Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?					
	☐ Yes ☐ No If yes, describe on an attached sheet. UNKNO	Mu				
10.	Have you paid — or will you be paying — an attorney any money for se including the completion of this form? ☐ Yes No	rvices in connection	with this case,			
	If yes, how much? \$					
11.	Have you paid — or will you be paying — anyone other than an attorney for services in connection with this case, including the completion of this	s form?				
	If yes, how much? \$					
12.	Provide any other information that will help explain why you cannot pay EXHAUSTED SAVINGS, CURRENT CLIENT MAY NEED TO BOORROW TO BRIDGE, IF NO	BEHIND PA	LYMENTS,			
13.	Identify the city and state of your legal residence.					
	Your daytime phone number: (520) 304-0129					
	Your age: 49 Your years of schooling: 12					
	Last four digits of your social-security number: 7678					